

FIG. 1

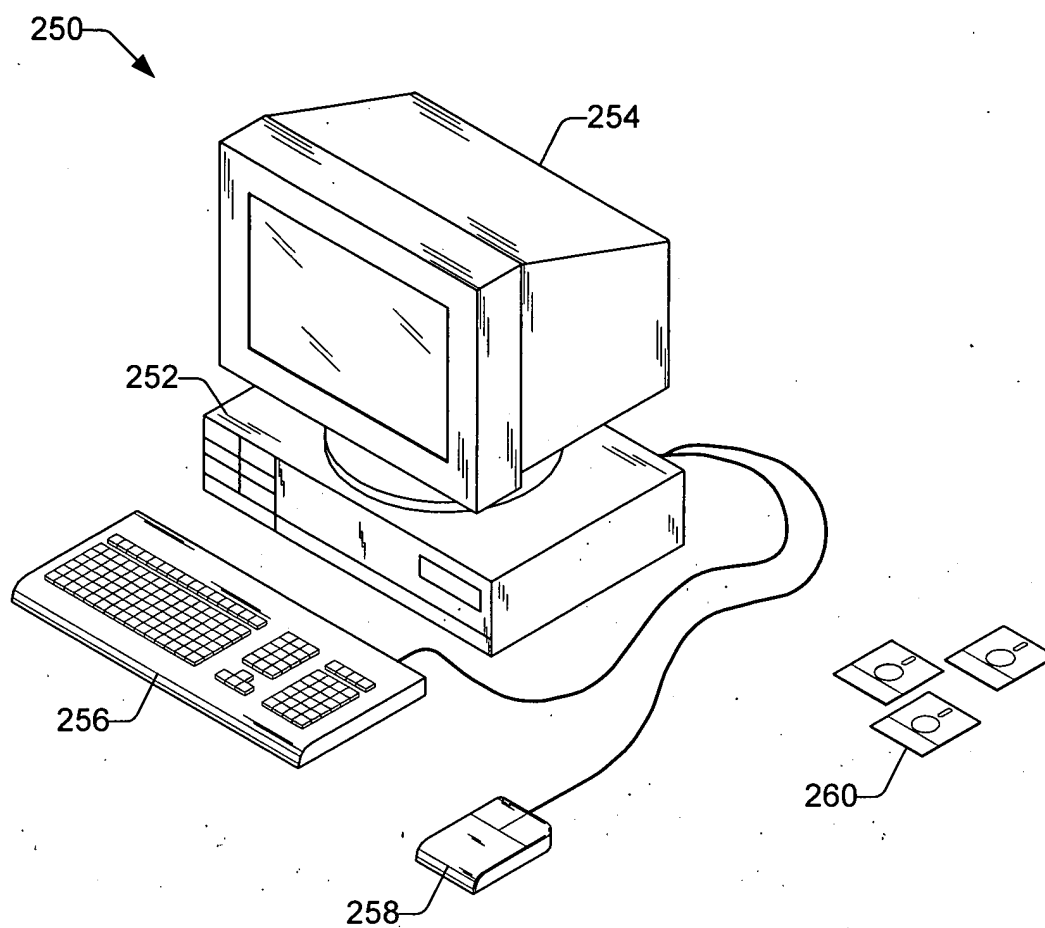


FIG. 2

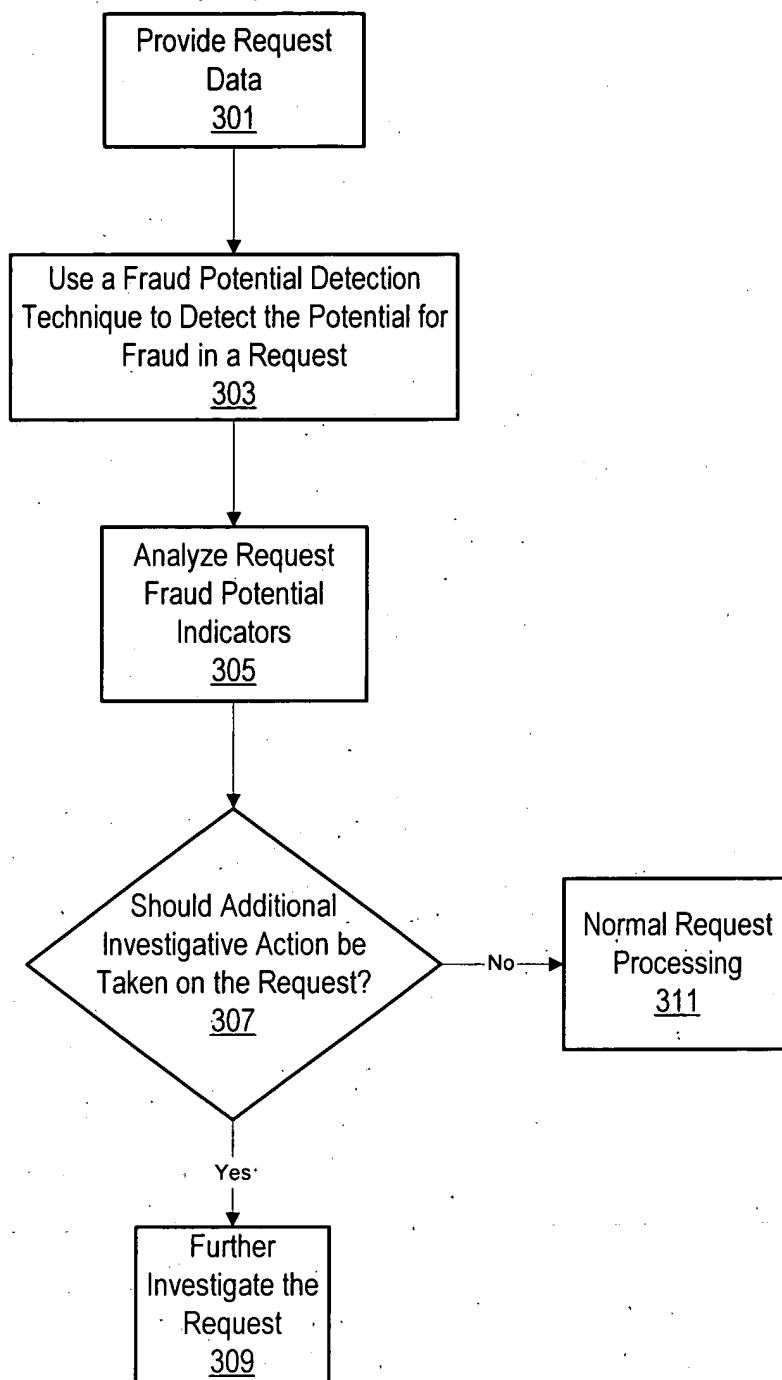


FIG. 3

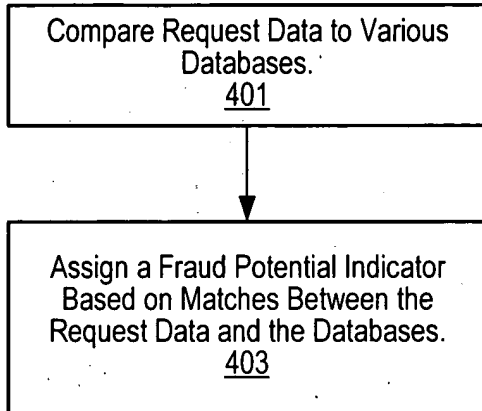


FIG. 4a

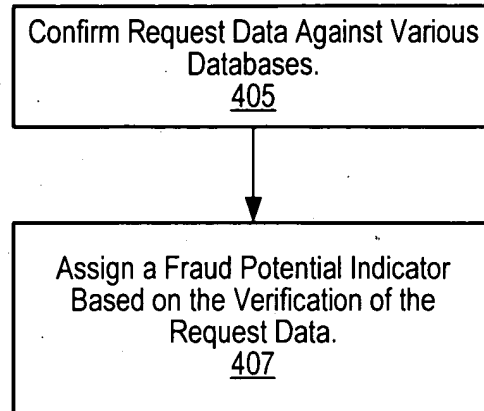


FIG. 4b

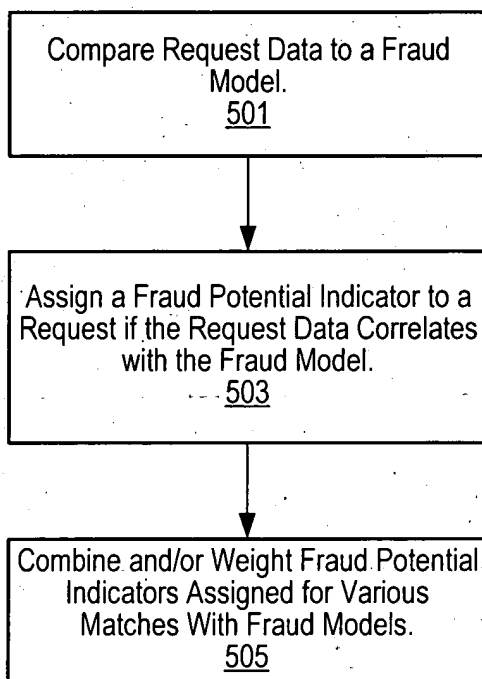


FIG. 5

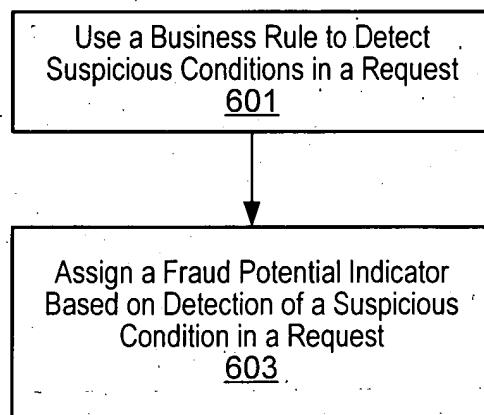


FIG. 6

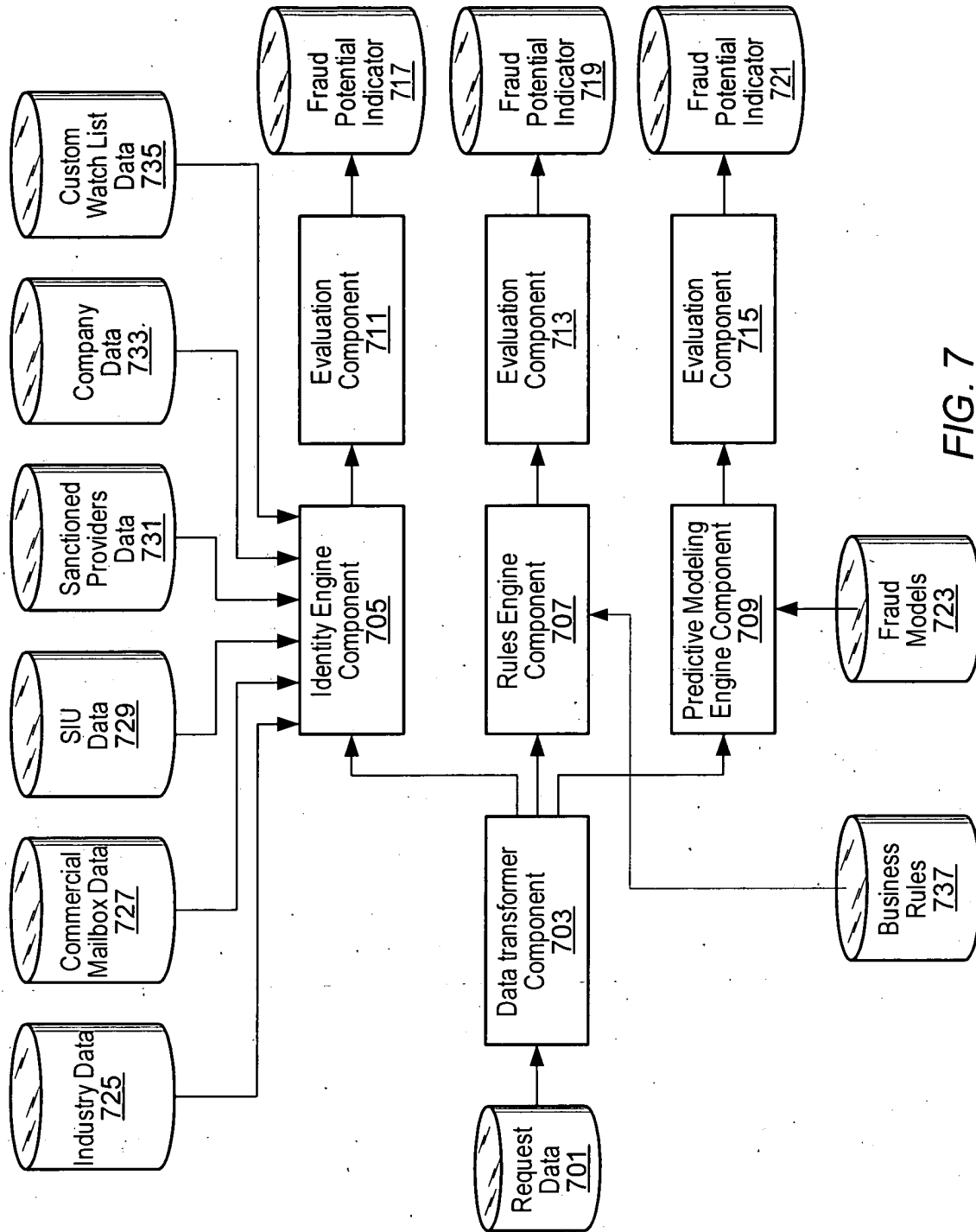


FIG. 7

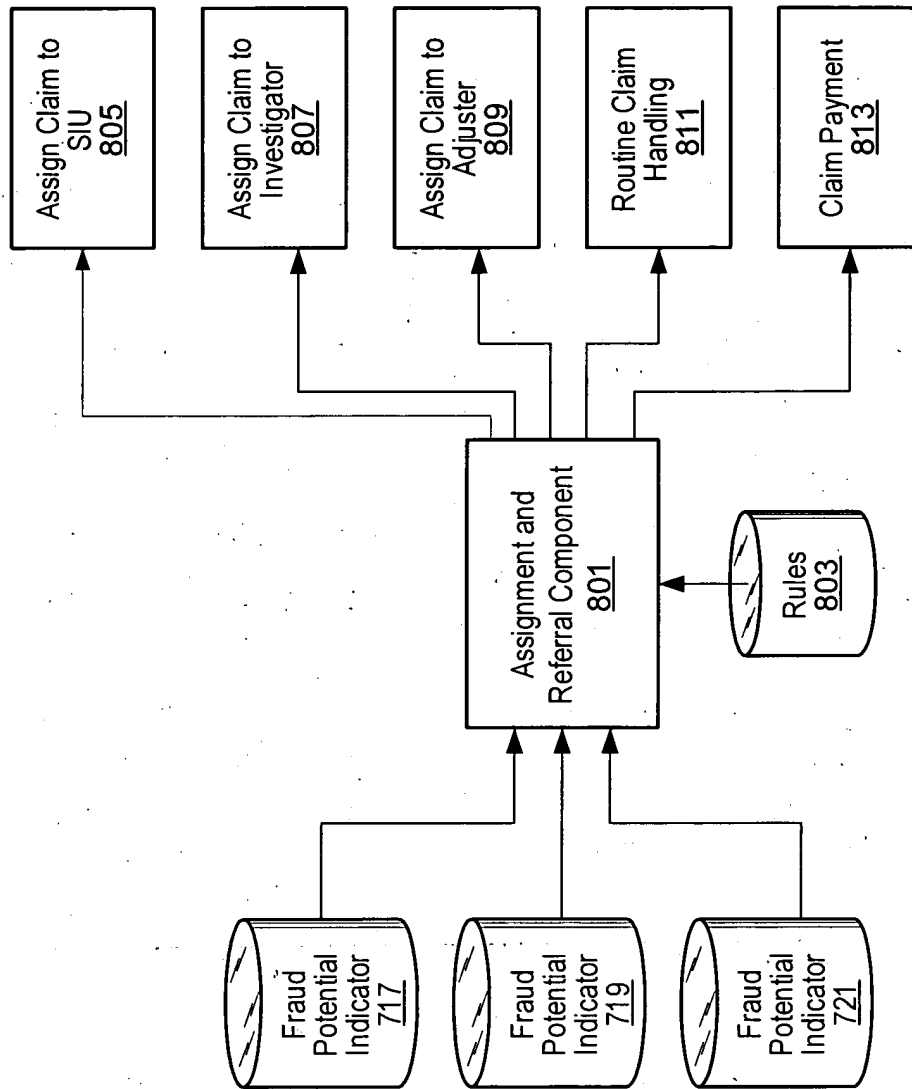


FIG. 8

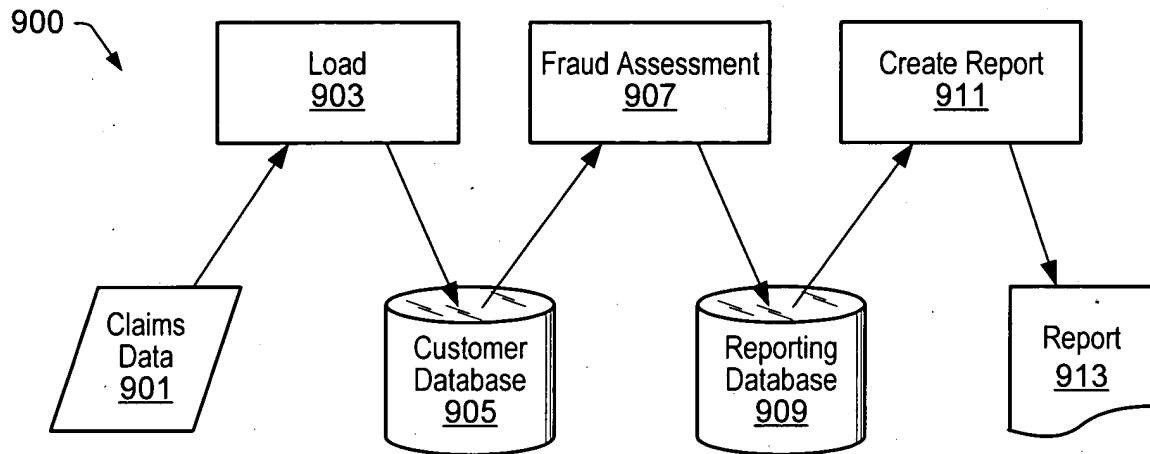


FIG. 9

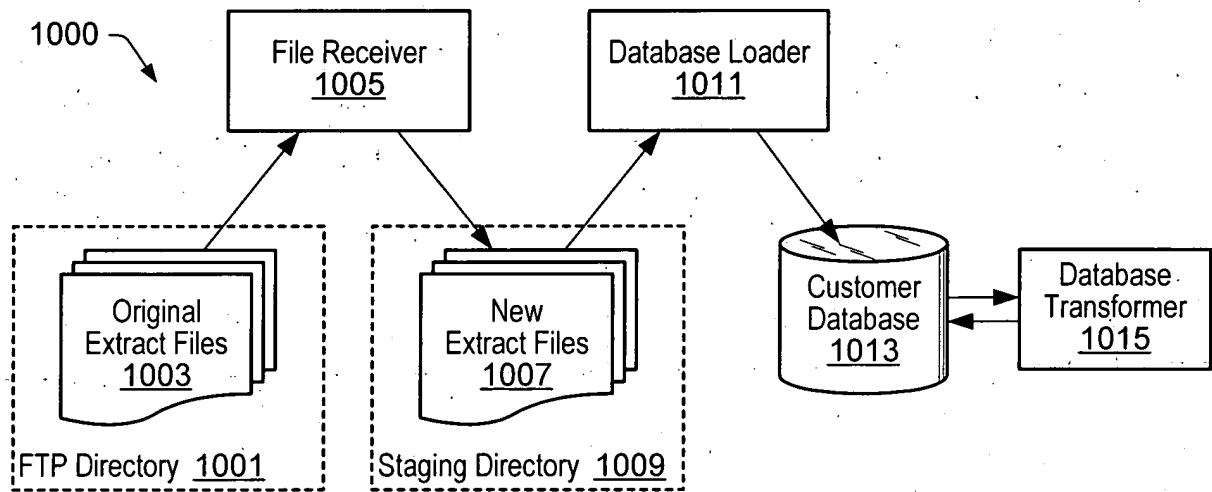


FIG. 10

Claim Summary							
Claim Number	1215498	DOL	12/02/2002	DOR	12/04/2002	Loss Location	Intersection at Oak & 3 <sup>rd</sup> Streets
Accident Description	Jagsg made left turn in front of Claimant				Policy Number	51598488522-1	
- Involved Vehicle							
1999 Volvo Stationwagon							
Object ID	236	Vin Number	W2E125EW581GE338E		Registration	LKE 1589	
- Involved Party		Address		Injury Description			
+ John Smith		123 Main Street, Gopher, LA 55896		Minor Injury			
+ John Smith Jr		123 Main Street, Gopher, LA 55896		Minor Injury			
- Involved Vehicle							
2000 Honda Accord							
Object ID	236	Vin Number	TE483WST6TE86845		Registration	U51-ER85	
- Involved Party		Address		Injury Description			
Henry Higgins		1505 S. Cockney Lane, LA 55896		Minor Injury			
- Related Party							
Address		Role					
Smith & Smith		315 Main Street, Gopher, LA 55896		Attorney			
Western Auto Repair		7461 W. 5 <sup>th</sup> Street, Gopher, LA 55896		Repair Shop			
Return to Prior Screen							

FIG. 11

1113

1101

1103

1105

1107

1109

1111



Watch List Display

1205		1211		1213		1215		1217		
Date Entered	Region	Author	DBA Name	Business Name	Last Name	First Name	M.I.			
10/23/02	A	Tom Jones	Smith & Smith, Inc.	Smith & Smith						
10/21/01	C	Fred Williams	Twisted Chiropractic	Franklin Chiropractic						
10/22/02	B	Shane Castle			Richardson	Kevin				
10/24/02	A	Tom Jones	Joe's Tow Service	Joe's Towing						
10/24/02	B	Shane Castle	Diversified Collision	Diversified Collision						
10/22/02	C	Fred Williams	Smithville Family Medical Center	Smithville Medical Center						

1201

1207 Add 1209 Update

FIG. 12

1311

Business Information

DBA Name

Twisted Chiropractic

Business Name

Twisted Chiropractic

Address

Street1

Street2

City

State

Zip

Business Phone

Area

Number

TIN

1313

1315

1309

Personal Information

Name

Last

First

MI

Address

Area

Number

Home Phone

Area

Number

SSN

1307

Role

Source

Comments

1303

Submit

Cancel

1305

FIG. 13

1301

11 / 20
1453

**Navigation**

- ☐ Home
- ☐ Manager Notebook
- ☐ Investigator Notebook
- ☐ Watch List
- ☒ Links
- ☒ References

**Manager Notebook**

**Referred**

**Assigned**

**Rejected**

**Regional Manager: Pain Menizies**

Sel	FCO	Claim Number	Loss Date	Score Date	PME Score	ISE Score	ORE Score
<input type="checkbox"/>	Albany Field Claim Office	AL A173390	05/24/2000	01/28/2003	100	150	74.2
<input type="checkbox"/>	Albany Field Claim Office	AL A363330	11/14/2000	01/28/2003	100	0	52
<input type="checkbox"/>	Albany Field Claim Office	AL A648060	06/01/2001	01/28/2003	100	0	67.4
<input type="checkbox"/>	Albany Field Claim Office	AL A798120	08/24/2001	01/28/2003	100	56.25	54.95
<input type="checkbox"/>	Albany Field Claim Office	AL A398990	12/08/2000	01/28/2003	100	0	48
<input type="checkbox"/>	Albany Field Claim Office	AL A859990	10/29/2001	01/28/2003	100	0	67.95
<input type="checkbox"/>	Albany Field Claim Office	AL A429660	12/25/2000	01/28/2003	20	0	54.025
<input type="checkbox"/>	Warwick Field Claim Office	M5A5-54-6	11/00/2001	01/28/2003	20	0	65.1
<input type="checkbox"/>	Naperville Field Claim Office	M9A019910	10/19/2001	01/28/2003	90	0	48
<input type="checkbox"/>	Albany Field Claim Office	AL A429500	12/22/2000	01/28/2003	76	0	69.275

**Total Claims Displayed: 10**

1409 1411 1415 1417 1419 1421 1423 1425 1427

1407

1405

1403

1429 1431

Assign.... Reject...

To assign or reject a claim use the mouse to click the column under the heading "Sel" and press either the "Assign" or "Reject" button

FIG. 14

1401

1501 1503 1409 1505 1507 1509 1511 1513 1515 1517

12 / 20

1453

Manager Notebook

ReferredAssignedRejected

Regional Manager: Randy Davis

SEL	Last Name	First Name	FCO	Claim Number	Loss Date	Score Date	PME Score	ISE Score	BRE Score	Days Assigned	Inv Status	Claim Status
<input type="checkbox"/>	Burgess	Robert	Albany Field Claim Office	AL4128883	11/04/1999	01/29/2003	100	0	87.15	0	New	Activ
<input type="checkbox"/>	Burgess	Robert	Albany Field Claim Office	AL2957127	06/09/1996	01/28/2003	100	0	97.475	0	New	Activ
<input type="checkbox"/>	Burgess	Robert	Naperville Field Claim Office	ALA204610	04/14/2000	01/28/2002	100	0	92.6	0	New	Activ
<input type="checkbox"/>	Burgess	Robert	Naperville Field Claim Office	ALA267500	08/19/2000	01/28/2003	100	0	67.8	0	New	Resp
<input type="checkbox"/>	Mendez	Pam	Naperville Field Claim Office	ALA372230	10/23/2000	01/28/2003	100	0	90.175	0	New	Activ
<input type="checkbox"/>	Burgess	Robert	Naperville Field Claim Office	ALA281575	12/19/2001	01/28/2003	100	0	58.4	0	New	Activ
<input type="checkbox"/>	Mendez	Pam	Albany Field Claim Office	ALA405630	12/12/2000	01/28/2003	100	0	27.2	0	New	Subra
<input type="checkbox"/>	Mendez	Pam	Albany Field Claim Office	ALA411730	11/14/2000	01/28/2000	100	0	68.5	0	New	Activ
<input type="checkbox"/>	Mendez	Pam	Naperville Field Claim Office	ALA450330	01/04/2001	01/28/2003	100	0	74.4	0	New	Resp
<input type="checkbox"/>	Mendez	Pam	Naperville Field Claim Office	MDA015720	11/10/2001	01/28/2003	100	0	72	0	New	Activ

Total Claims Assigned: 26

Navigation

- Home
- Manager Notebook
- Investigator Notebook
- Watch List
- Links
- References

To re-assign a claim use the mouse to click the column under the heading "Sel" and press the ReAssign button. To narrow the displayed list press the "Filter" button.

1519 1521 1523 1525

FIG. 15

1603 1605 1607 1411 1609 1611 1625 1627 1629 1637

1635 1601

**Manager Notebook**

**Referred Assigned Rejected**

**Regional Manager: Randy Davis**

**Total Claims Rejected: 59**

SEL	Last Name	First Name	FCO	Claim Number	Loss Date	Score Date	PME Score	ISE Score	BRE Score	Reason Rejected	Rejected Date	Claim Status
<input type="checkbox"/>	Davis	Randy	Seattle Field Claim Office	SEA221410	09/02/2001	09/10/2003	100	450	38	Valid Score-Satisfactory Review	09/04/2003	Close
<input type="checkbox"/>	Davis	Randy	Seattle Field Claim Office	SEA446650	01/16/2003	01/30/2003	100	0	50	Faulty PME Score	02/04/2003	Activ
<input type="checkbox"/>	Davis	Randy	Dallas Field Claim Office	DAA691970	01/02/2003	02/19/2003	22	0	104	Faulty PME Score	02/04/2003	Close
<input type="checkbox"/>	Davis	Randy	Seattle Field Claim Office	SEA169480	09/30/2001	01/20/2003	28	0	23.6	Valid Score-Satisfactory Review	02/04/2003	Subr
<input type="checkbox"/>	Davis	Randy	St Louis Field Claim Office	SLA066760	04/04/2000	02/13/2003	95	0	20	Faulty PME Score	02/04/2003	Resp
<input type="checkbox"/>	Davis	Randy	St Louis Field Claim Office	SLA249750	09/05/2001	02/16/2003	98	0	56	Valid Score-Satisfactory Review	02/04/2003	Activ
<input type="checkbox"/>	Davis	Randy	Dallas Field Claim Office	4W0016909	01/07/1999	02/10/2003	98	0	59.375	Valid Score-Satisfactory Review	02/04/2003	Close
<input type="checkbox"/>	Davis	Randy	Seattle Field Claim	SEA434870	12/14/2002	01/30/2003	98	0	70.6	Faulty PME Score	02/04/2003	Subr

To assign a claim use the mouse to click the column under the heading. Set and press the "Assign" button

**Assign**

**Navigation**

Home Manager Notebook Investigator Notebook Watch List Links References

1631 **FIG. 16**

1619 1621 1623

Investigator Notebook    Predicate Modeling Engine Summary

Identity Search Engine Summary    1711    1713    1715    Claim Number: ALA571230

Navigation

- Home
- Manager Notebook
- Investigator Notebook
- Watch List
- Administration
- Support Data
- User Setup
- Company Setup
- Links
- References

Involved People

Points	Name	Address	City	State	Zip	Met Claims	SIU	NICB	Comm Mlbx	Watch List
43	ROWAN, JOHN	217 SOUTH DIVISION ST	PEEKSKILL	NY	10566		1	0	0	
43	DABA, PETER	1074 CROMPON DR	PEEKSKILL	NY	10566		1	0	0	
42	MUNDA, ERIC	197 ROCKLEDGE AVE	BUCHANAN	NY	10511		1	0	0	
43	DABA, STEVE	1874 CROMPON DR	PEEKSKILL	NY	10566		1	0	0	
0	GEBERT, ERIC	UNK					0	0	0	

1717    1719    1721

Involved Organizations

Points	Name	DBA	Address	City	State	Zip	Sanctioned Drs	NICB	Comm Mlbx	Watch List
0	Helix Memorial Hospital		701 N Broadway	N Tarrytown	NY	10591	0	0	0	
0	Hudson Valley Hosp Ctr Cortland Community Org		1900 Crampound Rd	Peekskill	NY	10566	0	0	0	
0	Associates PC		1985 Crampound Rd	Peekskill	NY	10566	0	0	0	

1723    1725    1727    1729

Involved Vehicles

Points	Vin Nbs	License Info	Met Claims	SIU	NICB
47	WTNA3530R0514912	BX918W		1	0
47		AV709L		1	0
47		BX599I		1	0
47		2900NE		1	0

Previous

FIG. 17

Identity Search Engine Results				
Claim Number		154985		Accident Description
S-1 Met-Historical Database		1815	Points	52 1817
Source Name		Shelia Thompson		Address
Matches				
1809	Claims	Match Name	Match Address	
	131984	Shelia Thompson	3815 N. Treeling Dr., Gopher, LA 53895	
	545233	Shelly Thompson	3815 N. Treeling Dr., Gopher, LA 53895	
	125984	Shawn Thompson	3815 N. Treeling Dr., Gopher, LA 53895	
S-2 NICB Database		1811	Points	65 1813
Source Name		Shelia Thompson		Address
Matches				
1807	Record #	Match Name	Match Address	
	15941518	Shelly Thompson	3815 N. Treeling Dr., Gopher, LA 53895	
	53984898	Shawn Thompson	3815 N. Treeling Dr., Gopher, LA 53895	

FIG. 18

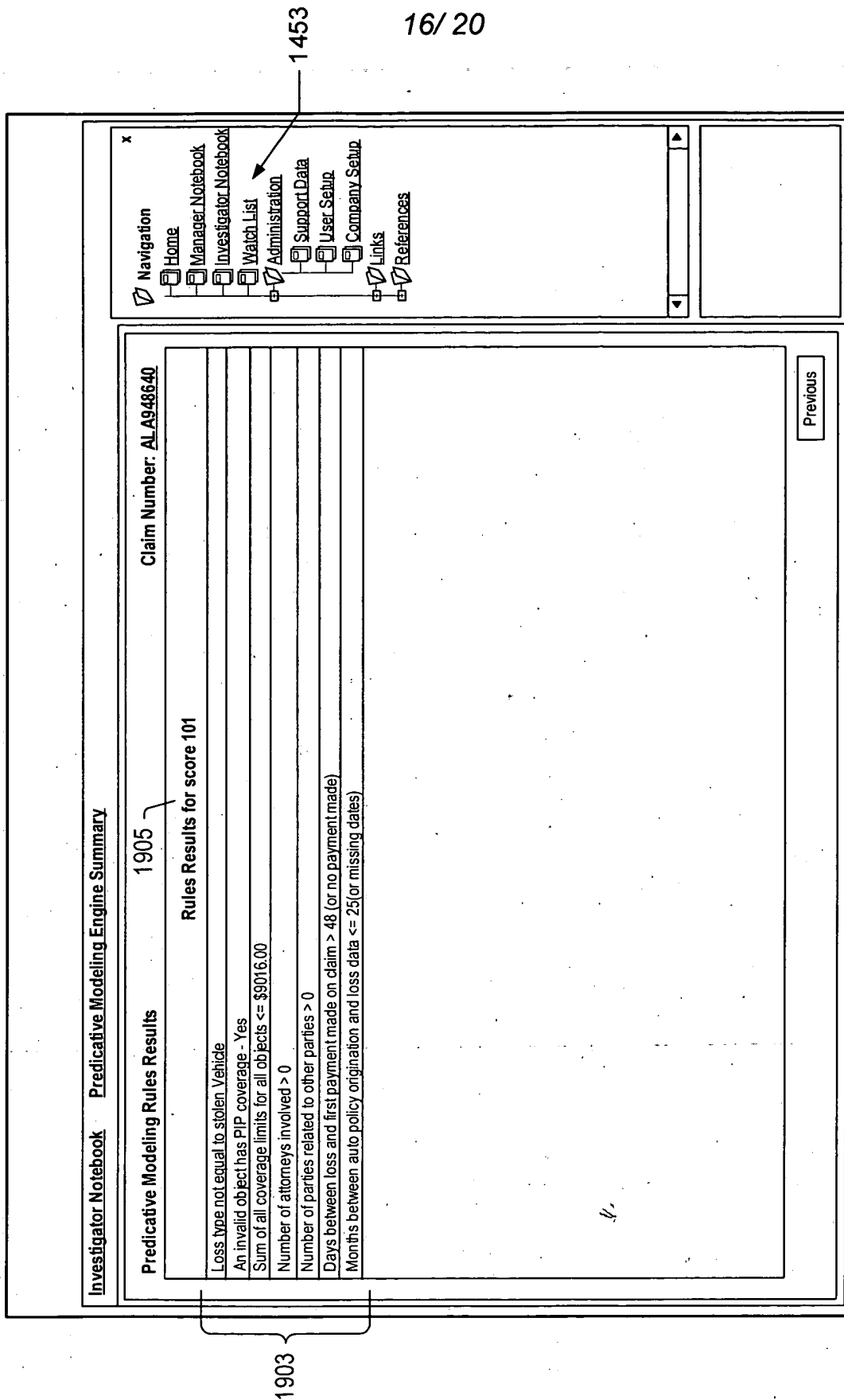


FIG. 19



Investigator Notebook    Business Rules Summary
Claim Number: ALAB878960

**SIU Business Rules Summary**

Points	Reason for score
22	B-1 Injury Type
28	B-2 Loss type is left turn
0	B-3 Diff Between Date of Loss Vs Date of Report is: 0
0	B-4 is not scored as Nbr of Renewals is 24
0	B-5 Diff Between Date of report Vs policy Exp Date is: 92
0	B-6 Police Report Filed: Y
0	B-7 Reported By Insured
0	B-8 Number of Vehicles is 2
50	Total Score

To view additional information about Injury Type use the mouse to click on "Injury Type" in the table above.

**Accident Description**

clmt made a left hand turn at an intersection cutting off insd

Previous

**Navigation**

- Home
- Manager Notebook
- Investigator Notebook
- Watch List
- Administration
- Support Data
- User Setup
- Company Setup
- Links
- References

2007

2005

2003

2001

FIG. 20

Investigator Notebook > Business Rules Summary > Business Rules Detail

SIU Business Rules Detail

2109

2111

Claim Number: ALAB878960

Points	Name	Injury Description
2	RATCLIFF, JENNIFER A	minor injury (superficial/ abrasion/ contusion)
2	DEPAUL, RYAN	minor injury (superficial/ abrasion/ contusion)
2	RATCLIFF, TIMOTHY A	Unknown
22	Total Score	

Accident Description

clmt made a left hand turn at an intersection cutting off insd

Navigation

Home

Manager Notebook

Investigator Notebook

Watch List

Administration

Support Data

User Setup

Company Setup

Links

References

**FIG. 21**

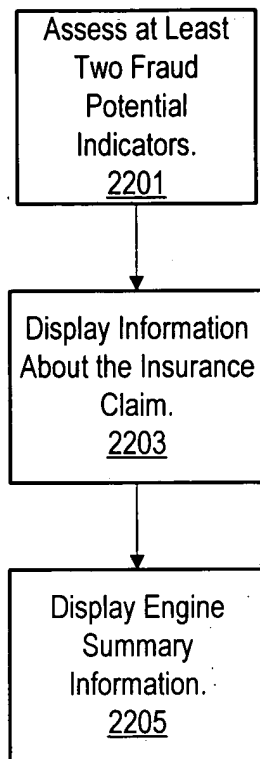


FIG. 22

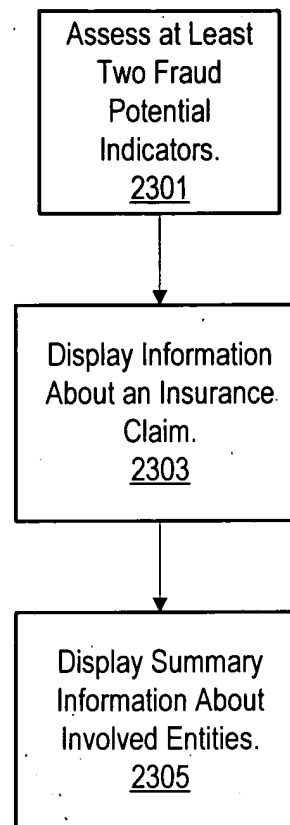


FIG. 23

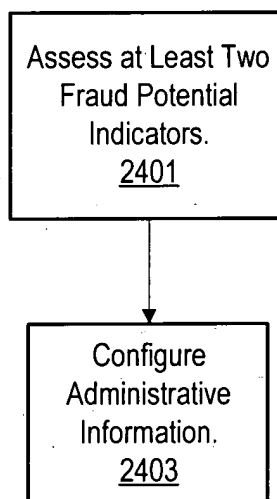
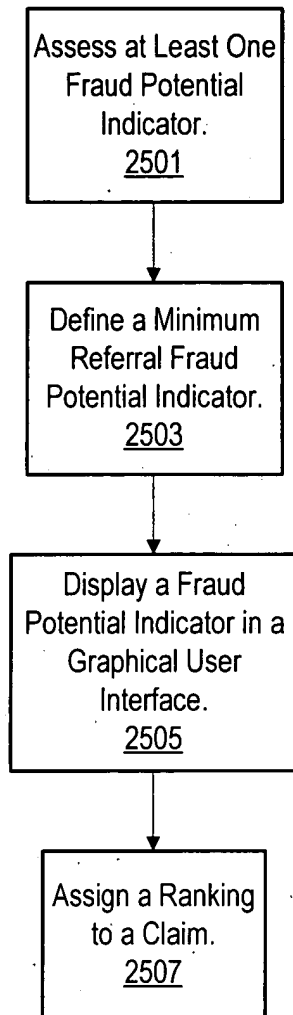
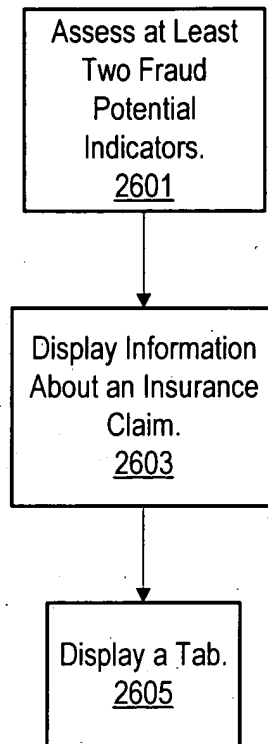


FIG. 24



**FIG. 25**



**FIG. 26**